STATE OF SOUTH DAKOTA

S.D. SEC. OF STATE

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500	E. Capitol, Pierre, SD	
1. TITLE OF NEWSPAPER The Minnehaha	Messengen	
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLIS		3B. ANNUAL SUBSCRIPTION PRICE \$ 32,
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE O		
(Not printers) 200 S. Washing for Ave,	Humbolet	SD 57035 - Minnehaha
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTE	0 11	
210 W. Main ST. EPOBOX 128	AND FOTA	SD 570/2
6. FULL NAME OF PUBLISHER: Watt ANDER	2 Som	
7. OWNER (If owned by a corporation, its name and address mu- addresses of stockholders owning or holding 1 percent or more names and addresses of the individual owners must be given. I and address, as well as that of each individual must be given. FULL NAME	of total amount of stoc f owned by a partnershi	k. If not owned by a corporation, the
INDERSON Rublications. INC 210 WN	Pam ST. Box 1	28 CANISTOTA SD STOIL
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, M state. If more space is needed, list on back of this form.	R SECURIT∜ HOLDEI MORTGAGES OR OTH	RS OWNING OR HOLDING I IER SECURITIES (If there are none, so
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. CO EACH ISSUED PRECEDI MONTHS	ACTUAL NO. COPIES
A.TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	700	780
B.PAID AND/OR REQUESTED CIRCULATION Sales through dealers and carriers, street vendors, and counter sales.	75	75
Mail Subscription (Paid and or requested)	456	473
3. Paid Electronic Copies		
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	531	548
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS		
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		
E.TOTAL DISTRIBUTION (Sum of C, D1 and D2)	531	548
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	169	32
2. Return from News Agents		
G.TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	700	580
Statement must be signed by Publisher, Business Mana I swear that the statements made by me are true, of (Signature)	eger, or Owner in the correct, and complete OWNER	Editor, President (Title)
State of South Dakota South A M. Oles Sworn to before me this 30 day of Sept , 20/9		
County of Munichal Me NOTARY PUBLIC My commission expires: 2/10/2022		
(Seal) SEAL SEAL		

Form: SOS REC 051 9/2016